UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, DC 20549



FORM D SEC USE ONLY Prefix Serial **OPICE OF SALE OF SECURITIES** RSUANT TO REGULATION D. DATE RECEIVED **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION Name of Offering: ( check if this is an amendment and name has changed, and indicate change.) Offering of Membership Interests. Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 □ Rule 506 ☐ Section 4(6) □ ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) REPUBLIC CORPORATION / NE Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 15706 Westchester Circle, Omaha, NE 68118 (402) 330-5729 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) **Brief Description of Business** Bank holding company. Type of Business Organization □ corporation ☐ limited partnership, already formed ☐ other (please specify): Company THOMSON ☐ business trust ☐ limited partnership, to be formed Estimated Actual or Estimated Date of Incorporation or Organization: Month Year 0 4 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; CN for Canada, FN for other foreign jurisdiction) Ε

# **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been, made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Michael Pate
Business or Residence Address (Number and Street, City, State, Zip Code)
15706 Westchester Circle, Omaha, NE 68118
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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				B. IN	FORMA'	TION A	BOUT O	FFERING				, <u></u>	
												Yes	No
1. Has the	e issuer soi	ld, or does tl	ne issuer inte	end to sell	to non-ac	credited	investors	in this off	er?				×
		Answer also						011	· · · · · · · · · · · · · · · · · ·			🖵	<u> </u>
			•••									<b>.</b>	200
2. What is	s the minit	mum investr	nent that wi	II be accep	ted from a	any indivi	dual?		•••••			\$ <u>100,</u> Yes	<u>000</u> No
3. Does th	ne offering	g permit join	t ownership	of a single	unit?	•••••	•••••		***************************************	••••••	•••••		
		ation reque											
commi	ission or s	imilar remui	neration for	solicitation	n of purch	asers in c	connection	ı with sale	es of secur	rities in th	ne offering	g.	
		listed is an											
		name of the							are associ	ated perso	ons of suc	h	
a broke	er or deale	r, you may s	set forth the	informatio	n for that	broker or	dealer or	ıly.					
Full Name	(Last nar	ne first, if in	dividual)	···	**.*	·,·,·							<del>-</del>
N/A													
Business of	r Residen	ce Address	(Number and	d Street, C	ity, State,	Zip Code	e)						
NI C	· · · · · · · · · · · · · · · · · · ·	D1	\1										
Name of A	Associated	Broker or I	Jealer										
States in V	Which Pers	son Listed H	las Solicited	or Intends	to Solicit	Purchase	ers				<u> </u>		
(Check	c "All Stat	es" or check	individual	States)								🔲 All Sta	tes
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Full Name	(Last nar	ne first, if in	dividual)								_	<u>-</u>	
Business o	or Residen	ce Address	(Number an	d Street C	ity. State	Zip Code	e)		<del></del>	····	<del></del>		
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Name of A	Associated	Broker or I	Dealer		w"			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
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run Name	trasi nar	ne msi, m	iuiviuuai)										
Business	or Residen	ce Address	(Number an	d Street, C	ity, State,	Zip Code	e)	VIII.		~			
Name	A	I D 1	N1										
Name of A	Associated	Broker or I	Jealer										
States in V	Which Per	son Listed H	las Solicited	or Intende	to Solici	t Purchase	ers						
(Checl	k "All Stat	es" or check	individual	States)								□ All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount		
	already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering,		
	check this box $\square$ and indicate in the columns below the amounts of the securities offered for		
	exchange and already exchanged.	A	A
		Aggregate Offering Price	Amount Already Sold
	Type of Security	Offering 1 fice	Solu
	Debt	\$	\$0
	Equity	\$10,000,000	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$0-	\$
	Partnership Interests	\$ -0-	\$ -0-
	Other	\$ -0-	\$ -0-
		\$ 10,000,000	\$ -0-
	Total	\$	Ψ
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number of	Aggregate Dollar Amount
		Investors	of Purchases
			011 41 01140 02
	Accredited Investors	-0-	\$0
	Non-accredited Investors	-0	\$ <u>-0-</u>
	Total (for filings under Rule 504 only)	-0	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	D 1 404		\$
	Rule 505		\$ \$
	Regulation A		9
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	🗵	\$5,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
			\$
	Other Expenses (identify)		\$
	I VIGI		·

	C. OFFERING, PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 9,995,000
١.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b. above.		
		Payments to Officers, Directors & Affiliates	Payments to Others
	Salaries and fees	□ \$	□ \$
	Purchase of real estate	<b>\$</b>	□ \$
	Purchase, rental or leasing and installation of machinery and equipment	<b>\$</b>	□ \$
	Construction or leasing of plant buildings and facilities	□ <b>\$</b>	□ \$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange of the assets or securities of		
	another issuer pursuant to a merger)	<b>\$</b>	□ \$
	Repayment of indebtedness	<b>\$</b>	□ \$
	Working capital	<b>\$</b>	<b>■</b> \$ 9,995,000
	Other (specify)	<b>\$</b>	□ \$
		<b>\$</b>	□ \$
		<b>\$</b>	<b>\$</b>
	Column Totals	<b>\$</b>	□ \$
	Total Payments Listed (column totals added)	<b>⋈</b> \$ <u>9,9</u>	95,000

The issuer has duly caused this notice to be signed by following signature constitutes an undertaking by the iss	the undersigned duly authorized person. If this notice uer to furnish to the U.S. Securities and Exchange Comm	nission, upon written request
Issuer (Print or Type) REPUBLIC CORPORATION	Signatury /	Date 7-20-05
Name of Signer (Print or Type) Michael Pate	Title of Signer (Print or Type) Chief Executive Officer and President	
Name of Signer (Print or Type)  Michael Pate  ATTENTION  Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001  E. STATE SIGNATURE  1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?  See Appendix, Column 5, for state response.  2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a neform D (17 CFR 239.500) at such times as required by state law.  3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the to offerees.  4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the United Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availathis exemption has the burden of establishing that these conditions have been satisfied.  The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf undersigned duly authorized person.  Issuer (Print or Type)  Signature  Page Official or Type)  Page	oo 18 II S C 1001)	
Intentional inisstatements of omissions of	i fact constitute federal ci infinal violations. (Si	æ 16 U.S.C. 1001).
	E. STATE SIGNATURE	
		Yes No □ ⊠
See App	pendix, Column 5, for state response.	
		notice is filed, a notice on
	h to the state administrators, upon written request, inform	ation furnished by the issuer
Limited Offering Exemption (ULOE) of the state in	n which this notice is filed and understands that the issue	
	ontents to be true and has duly caused this notice to be	signed on its behalf by the
Issuer (Print or Type)	Signagy/e / ///	
· · · · · · · · · · · · · · · · · · ·	Mountage	7.20-05
Name of Signer (Print or Type)	Title of Signer (Print or Type)	

## Instruction:

**Michael Pate** 

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

**Chief Executive Officer and President** 

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APPEN	DIX
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1	2		3			4		5		
	Intend t non-acc investors (Part B -	redited in State	Type of security and aggregate offering price offered in State (Part C – Item 1)		investor and a (Part C	amount purchased in C – Item 2)	State	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E - Item 1)		
				Number of Accredited		Number of Non-Accredited				
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AK									<u> </u>	
AZ								!		
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Intend to sell to non-accredited investors in State (Part B - Item 1)   Improve of price of ferd in State (Part B - Item 1)   Improve of price of ferd in State (Part B - Item 1)   Improve of price of ferd in State (Part C - Item 2)   Improve of price of ferd in State (Part C - Item 2)   Improve of price of price of ferd in State (Part C - Item 1)   Improve of price of	1		2	3	,=	- <b></b>	4		5	
State   Yes		non-acci	credited s in State	aggregate offering price offered in State		investor and a	C – Item 2)	State	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)	
MO MT NE X Common Stock -000- X  NV NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX TX UT VT VA WA	State	Ves	No		Accredited	Amount	Non-Accredited	Amount	Vas	No
NE			110		Investors	1 KINOUME	Investors	Zimount	. 03	110
\$10,000,000  NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA	MT									
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NC ND OH OH OK OK OR OR OT	NM									
ND         OH           OK         OK           OR         OK           PA         OK           RI         OK           SC         OK           SD         OK           TN         OK           TX         OK           UT         OK           VA         OK           WA         OK	NY									
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OR         PA           PA         Image: RI imag	ОН									
PA         RI           SC         SD           TN         TX           UT         VT           VA         WA	OK	-								
RI SC SD	OR									
SC           SD           TN           TX           UT           VT           VA           WA	PA									
SD         TN           TX         UT           VT         VA           WA         WA	RI	-		3						
TN	SC	-								
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WA WA	VT									
	VA							, , , , , , , , , , , , , , , , , , ,		
WV	WA			an paradegraph (Bereiter)						
	WV									

APPENDIX	(

1	2 3						5 Disqualification under			
	non-ac investor	to sell to credited s in State – Item 1)	Type of security and aggregate offering price offered in State (Part C – Item 1)	Type of	Type of investor and amount purchased in State (Part C – Item 2)				State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WI										
WY					·····					
PR										

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